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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

JUL 21 20%



CSC - WILMINGTON Suite 400 2711 Centerville Road Wilmington De 19808 800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard

llockar2@cscinfo.com

Date: July 1, 2014

Order#: 184551/009

Re: CEMETERY MANAGEMENT, INC.

Enclosed please find:

Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.
XX Return Regular Mail in the enclosed envelope.

Attn:Lindsey Lockard

c/o Corporation Service Company 2711 Centerville Road, Suite 400

Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	- · · · · · · · · · · · · · · · · · · ·	7.0502, 607.1508, or 617.1508, Florida Statute.	s, this		
•		organized under the laws of the State of FL			
in orde	er to change its registered office or r	registered agent, or both, in the State of Florida			
1. The name of	the corporation: CEMETERY MANA	AGEMENT, INC.			
2. The principal	office address:				
5101 NEBR	ASKA AVENUE, TAMPA FL 33603	3			
3. The mailing a	address (if different): 1929 Allen Pa	arkway, Tax Dept., Houston, TX 77019			
4. Date of incor	poration/qualification: 01/20/1982	Document number: F66417			
	d street address of the current register rtment of State: (If resigned, enter re	ered agent and registered office on file with the esigned)			
	CT CORPORATION SYSTEM			•	
	1200 PINE ISLAND ROAD		SECI	الا كا ا	
	PLANTATION	FL 33324	RETAR	JL -3	
6. The name and (if changed):	d street address of the new registered	d agent (if changed) and /or registered office	TARY OF STATE ASSEE, FLORIDA	14 JUL -3 PH 12: 26	(
	Corporation Service Company		REP.	26	
	1201 Hays Street		15		
	P.O. Bo	x NOT acceptable			
	Tallahassee	FL 32301			
The street address changed will	ess of its registered office and the s	street address of the business office of its regist	ered ager	ıt,	
Such change was authorized by the	as authorized by resolution duly ad he board, or the corporation has bee	opted by its board of directors or by an officer en notified in writing of the change.	so		
Dona Priebe, Vice President		Dona Priebe, Vice President			
Synan	re () office, or director	Printed or typed name and title			
I further agree performance of agent. Or, if th hereby confirm	to comply with the provisions of all my duties, and I am familiar with .	nt and agree to act in this capacity. I statutes relative to the proper and complete and accept the obligation of my position as reg o reflect a change in the registered office addr fied in writing of this change.	gistered ess, I		
By: X	ace C-Kubie	06/25/2014			
	chalf of an entity:	Date			
	·				
	, Assistant Vice President				

* * * FILING FEE: \$35.00 * * *